



OHIO LEGISLATIVE SERVICE COMMISSION

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Fiscal Note & Local Impact Statement

Bill: S.B. 119 of the 132nd G.A.

Status: As Reported by House Health

Sponsor: Sens. Hackett and Hottinger

Local Impact Statement Procedure Required: No

Subject: Address opioid prescription tracking and reporting, and naltrexone and medication-assisted treatment

State & Local Fiscal Highlights

- The State Board of Pharmacy expects: (1) one-time expenses of up to \$20,000 to make required changes to the Ohio Automated Rx Reporting System (OARRS) and (2) minimal at most ongoing administrative expenses to comply with the bill's reporting requirements.
- The Ohio Department of Health (ODH) could experience an increase in costs to receive, analyze, and disseminate information submitted from the Department of Public Safety (DPS) regarding the administration of naloxone by emergency service personnel or firefighters.
- ODH may also experience a minimal increase in costs if rules are adopted regarding the reporting requirements for DPS.
- Any state or local government entities that operate pharmacies may experience an increase in costs to comply with the requirements for dispensing naltrexone without a prescription.
- State and local health programs could realize an increase in dispensing costs as a result of the provision that allows pharmacists to dispense naltrexone without a prescription and to report naltrexone prescription orders in OARRS. This cost could be offset by savings if this provision results in better health outcomes.

Detailed Fiscal Analysis

Naltrexone and the Ohio Automated Rx Reporting System

The bill requires the State Board of Pharmacy to use the Ohio Automated Rx Reporting System (OARRS) to monitor naltrexone and to report an aggregate of the information reported to OARRS concerning naltrexone on a semiannual basis in the same manner that it is required under continuing law to report for opioid prescriptions and medical marijuana. The Board anticipates an initial one-time expense of between \$10,000 and \$20,000 to work with the OARRS vendor to update the system to allow

users to report naltrexone prescriptions and minimal ongoing administrative costs to report naltrexone activities.

The bill also requires a pharmacist or licensed health professional authorized to prescribe drugs to report to OARRS after dispensing or personally furnishing naltrexone. There could be an increase in costs for any local boards of health that act as a pharmacy and fill prescription orders, as the board would be responsible for reporting this information to OARRS. Costs would depend on the board's current access to OARRS and may involve information technology updates. However, it appears that in most, if not all, cases, licensed health professionals employed by local boards prescribe naltrexone and then a pharmacy fills the order. In these instances, there would be no additional costs for boards of health since the pharmacy would likely be responsible for reporting this information.

Reporting of naloxone administration

The bill requires the Department of Public Safety (DPS), if it collects certain information concerning the administration of naloxone by emergency service personnel and firefighters, to report that information to the Ohio Department of Health (ODH) on a monthly basis. According to DPS, there will be no cost to provide this information. Additionally, the bill requires ODH to compile the information received, organize it by county, and forward it to each local board of alcohol, drug addiction, and mental health services. According to ODH, costs for the Department of Health would depend on how the information is provided, though there would likely be costs to analyze and disseminate the data. The bill also allows ODH to adopt rules as necessary to implement these provisions. There could be a minimal increase in costs for ODH if rules are adopted.

Dispensing naltrexone

The bill allows a pharmacist to dispense naltrexone without a prescription from a prescriber if the pharmacist:

- Is able to verify a record of a prescription for the injectable long-acting or extended release form of naltrexone for the patient if certain criteria are met;
- Is unable to obtain authorization to refill the prescription; and
- Determines in their professional judgment the drug is needed to continue the patient's therapy and failure to dispense the drug could result in harm to the health of the patient.

The bill specifies the pharmacist must use their professional judgement in determining the number of times naltrexone can be dispensed to the same patient without a prescription. The Board of Pharmacy may realize a minimal increase in costs if there are any additional duties associated with the provision, such as addressing questions or complaints.

After providing the drug, the pharmacist is required to maintain a record for one year that indicates the amount of and form of naltrexone dispensed, the original prescription number, and the name and address of the patient. Maintaining these records may require the Board of Pharmacy to upgrade OARRS, which could result in information technology costs. In addition to maintaining a record, the pharmacist must notify the prescriber within five days after dispensing naltrexone.

Any state or local government entities that operate pharmacies could realize administrative costs to comply with these requirements. The cost would depend on the number of individuals seeking naltrexone under the bill's criteria. Additionally, state and local health programs, including Medicaid, could realize an increase in pharmaceutical dispensing costs as a result of the provision. On the other hand, if the provision led to better health outcomes, then there could be a savings in associated medical or treatment costs. The Ohio Department of Medicaid anticipates the costs associated with this provision to be minimal. However, the total fiscal impact will depend on utilization, as well as the number of times a pharmacist dispenses naltrexone to each individual.

Civil and criminal immunity

The bill establishes conditions for civil and criminal immunity for administering naltrexone via injection. These conditions include when the individual is unable to have the drug administered:

- By a person who routinely administers naltrexone to the individual;
- At a facility in which it is routinely administered; or
- Under the direction of the drug's prescriber.

This provision may result in a savings of any court costs and fees for state and political subdivisions that employ workers which administer naltrexone if any cases are brought forward.